

FILED OCT 10 1952

THE DIVISION OF HEALTH OF MISSOURI
STANDARD CERTIFICATE OF DEATH

34034

State File No.

BIRTH NO.		REG. DIST. NO. 362		PRIMARY REG. DIST. NO. 4531		Registrar's No. 68	
1. PLACE OF DEATH a. COUNTY Warren				2. USUAL RESIDENCE (Where deceased lived. If institution: residence before admission). a. STATE Missouri b. COUNTY Warren			
b. CITY (If outside corporate limits, write RURAL and give township) OR TOWN Warrenton		c. LENGTH OF STAY (in this place) 30 years		c. CITY (If outside corporate limits, write RURAL and give township) OR TOWN Warrenton		1090	
d. FULL NAME OF HOSPITAL OR INSTITUTION				d. STREET ADDRESS (If rural, give location) South 47 Street 0			
3. NAME OF DECEASED (Type or Print)		a. (First) Edward H. Busekrus		b. (Middle)		c. (Last)	
4. DATE OF DEATH		(Month) (Day) (Year)		Sept. 20, 1952			
5. SEX Male 0		6. COLOR OR RACE White		7. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Married		8. DATE OF BIRTH Jan. 22, 1871	
9. AGE (In years last birthday) 81		10. UNDER 1 YEAR Months 7 Days 28		11. BIRTHPLACE (State or foreign country) Missouri 0		12. CITIZEN OF WHAT COUNTRY? USA	
10a. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) Carpenter		10b. KIND OF BUSINESS OR INDUSTRY Construction		13a. FATHER'S NAME Phillip Busekrus		13b. MOTHER'S MAIDEN NAME Louisa Mische	
13c. NAME OF HUSBAND OR WIFE Caroline Dreyer Busekrus		14. WAS DECEASED EVER IN U.S. ARMED FORCES? (Yes, no, or unknown) (If yes, give war or dates of service) No		15. SOCIAL SECURITY NO. None		16. INFORMANT'S SIGNATURE OR NAME Mrs. Edw. H. Busekrus, Warrenton, Mo.	
17. ADDRESS		18. CAUSE OF DEATH Enter only one cause per line for (a), (b), and (c) *This does not mean the mode of dying, such as heart failure, asphyxia, etc. It means the disease, injury, or complication which caused death.		MEDICAL CERTIFICATION I. DISEASE OR CONDITION DIRECTLY LEADING TO DEATH* (a) Coronary occlusion acute ANTECEDENT CAUSES Morbidity conditions, if any, giving rise to the above cause (a) stating the underlying cause last. DUE TO (b) Chronic Myocarditis DUE TO (c) Atherosclerosis generalized II. OTHER SIGNIFICANT CONDITIONS Conditions contributing to the death but not related to the disease or condition causing death. sun -		INTERVAL BETWEEN ONSET AND DEATH 10 min	
19a. DATE OF OPERATION		19b. MAJOR FINDINGS OF OPERATION		20. AUTOPSY? YES <input type="checkbox"/> NO <input type="checkbox"/>		4201	
21a. ACCIDENT SUICIDE HOMICIDE (Specify)		21b. PLACE OF INJURY (e.g., in or about home, farm, factory, street, office bldg., etc.)		21c. (CITY, TOWN, OR TOWNSHIP) (COUNTY) (STATE)			
21d. TIME OF INJURY (Month) (Day) (Year) (Hour) (Min.)		21e. INJURY OCCURRED WHILE AT WORK <input type="checkbox"/> NOT WHILE AT WORK <input type="checkbox"/>		21f. HOW DID INJURY OCCUR?			
22. I hereby certify that I attended the deceased from May 21, 1952, to July 18, 1952, that I last saw the deceased alive on July 18, 1952, and that death occurred at 6:30 A.M., from the causes and on the date stated above.							
23a. SIGNATURE (Degree of title)		23b. ADDRESS		23c. DATE SIGNED		9-20-52	
24a. BURIAL, CREMATION, REMOVAL (Specify) Burial 0		24b. DATE Sept. 22, '52		24c. NAME OF CEMETERY OR CREMATORY Warrenton Cemetery		24d. LOCATION (City, town, or county) (State) Warrenton, Mo.	
DATE REC'D BY LOCAL REG. 9-23-52		REGISTRAR'S SIGNATURE Floyd Logan		25. FUNERAL DIRECTOR'S SIGNATURE F.W. Nieburg & CO., Warrenton, Mo.		ADDRESS	

(Licensed Embalmer's Statement on Reverse Side)

WRITE PLAINLY—USING UNFADING BLACK INK—MAKE A PERMANENT RECORD

STATEMENT BY LICENSED EMBALMER

I hereby certify that the body whose name is recorded on the reverse side of this certificate was embalmed by me, or by _____

working under my personal supervision.

Signed.....
Student Embalmer

Student Embalmer No.
Signed John E. Verleuger
Licensed Embalmer No. 4409
P. O. Address Warrenton Me

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license.)

If this body is not embalmed, fact should be so stated above.